

AMENDED IN ASSEMBLY AUGUST 7, 2006

AMENDED IN ASSEMBLY JUNE 20, 2006

AMENDED IN SENATE APRIL 20, 2006

AMENDED IN SENATE APRIL 6, 2006

**SENATE BILL**

**No. 1755**

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**Introduced by Senator Chesbro**

February 24, 2006

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An act to add Sections 14522.3, *14526.1*, 14528.1, 14550.5, and 14550.6 to, and to repeal and add Section 14525 of, the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

SB 1755, as amended, Chesbro. Medi-Cal: adult day health care services.

The California Adult Day Health Care Act provides for the licensure and regulation of adult day health centers, with administrative responsibility for this program shared between the State Department of Health Services and the California Department of Aging pursuant to an interagency agreement.

The Adult Day Health Medi-Cal Law establishes adult day health care services as a Medi-Cal benefit for Medi-Cal beneficiaries who meet certain criteria. *Under existing law, participation in an adult day health care program requires prior authorization by the State Department of Health Services.*

This bill would revise the eligibility criteria for adult day health care services.

*The bill would allow initial and subsequent treatment authorization requests to be granted for up to six calendar months. It would require*

*that treatment authorization requests be initiated by the adult day health care center and include specified elements, and that authorization or reauthorization of a treatment request be granted only if the participant meets certain medical necessity criteria.*

The bill would require that a participant's personal health care provider, as defined, have and retain responsibility for the participant's care. The bill would impose specified duties on an adult day health care center with respect to a participant who does not have a personal health care provider.

Existing law requires adult day health centers to offer, and provide directly on the premises, specified services.

This bill would require adult day health centers to offer, and provide directly on the premises, in accordance with the participant's individual plan of care, and subject to authorization, specified core services to each participant during each day of the participant's attendance at the center, including nursing services, personal care or social services, therapeutic activities, and one meal.

The bill would allow an adult day health care center to provide one or more of the specified core services at an enhanced level if any of certain conditions occurs.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

- 1 SECTION 1. Section 14522.3 is added to the Welfare and
- 2 Institutions Code, to read:
- 3 14522.3. The following definitions shall apply for the
- 4 purposes of this chapter.
- 5 (a) "Activities of daily living" (ADL) means activities
- 6 performed by the participant for essential living purposes,
- 7 including bathing, dressing, self-feeding, toileting, ambulation,
- 8 and transferring.
- 9 (b) "Instrumental activities of daily living" (IADL) means
- 10 activities performed for the purpose of functioning within a
- 11 participant's home and community environment.
- 12 (c) "Personal health care provider" means the participant's
- 13 personal physician, physician's assistant, or nurse practitioner,
- 14 operating within his or her scope of practice.

(d) “Care coordination” means the process of obtaining information from, or providing information to, the participant, the participant’s family, the participant’s primary health care provider, or social service agencies to facilitate the delivery of services designed to meet the needs of the participant, as identified by one or more members of the multidisciplinary team.

(e) “Facilitated participation” means an interaction to support a participant’s involvement in a group or individual activity, whether or not the participant takes active part in the activity itself.

(f) “Group work” means a social work service in which a variety of therapeutic methods are applied within a small group setting to promote participants’ self-expression and positive adaptation to their environment.

(g) “Professional nursing” means services provided by a registered nurse or licensed vocational nurse functioning within his or her scope of practice.

(h) “Psychosocial” means a participant’s psychological status in relation to the participant’s social and physical environment.

SEC. 2. Section 14525 of the Welfare and Institutions Code is repealed.

SEC. 3. Section 14525 is added to the Welfare and Institutions Code, to read:

14525. Any adult eligible for benefits under Chapter 7 (commencing with Section 14000) shall be eligible for adult day health care services if that person meets all of the following criteria:

(a) The person is 18 years of age or older and has one or more chronic or postacute medical, cognitive, or mental health conditions, and a physician, nurse practitioner, or other health care provider has, within his or her scope of practice, requested adult day health care services for the person.

(b) The person has functional impairments in two or more activities of daily living, instrumental activities of daily living, or a combination of both, and requires assistance or supervision in performing these activities.

(c) The person requires ongoing or intermittent protective supervision, skilled observation, assessment, or intervention by a skilled health or mental health professional to improve, stabilize,

1 maintain, or minimize deterioration of the medical, cognitive, or  
2 mental health condition.

3 (d) The person requires adult day health care services, as  
4 defined in Section 14550, that are individualized and planned,  
5 including, when necessary, the coordination of formal and  
6 informal services outside of the adult day health care program to  
7 support the individual and his or her family or caregiver in the  
8 living arrangement of his or her choice and to avoid or delay the  
9 use of institutional services, including, but not limited to, hospital  
10 emergency department services, inpatient acute care hospital  
11 services, inpatient mental health services, or placement in a  
12 nursing facility or an intermediate care facility for the  
13 developmentally disabled.

14 *SEC. 4. Section 14526.1 is added to the Welfare and*  
15 *Institutions Code, to read:*

16 *14526.1. (a) Initial and subsequent treatment authorization*  
17 *requests may be granted for up to six calendar months.*

18 *(b) Treatment authorization requests shall be initiated by the*  
19 *adult day health care center, and shall include all of the*  
20 *following:*

21 *(1) The signature page of the history and physical form that*  
22 *shall serve to document the request for adult day health care*  
23 *services. A complete history and physical form, including a*  
24 *request for adult day health care services signed by the*  
25 *participant's personal health care provider, shall be maintained*  
26 *in the participant's health record. This history and physical form*  
27 *shall be developed by the department and published in the*  
28 *inpatient/outpatient provider manual. The department shall*  
29 *develop this form jointly with the statewide association*  
30 *representing adult day health care providers.*

31 *(2) The participant's individual plan of care, approved and*  
32 *signed by the participant's personal health care provider or,*  
33 *pursuant to Section 14528.1, the adult day health care center*  
34 *staff physician, and by the appropriate members of the*  
35 *multidisciplinary team, pursuant to Section 54211 of Title 22 of*  
36 *the California Code of Regulations.*

37 *(b) Every six months, the adult day health care center shall*  
38 *initiate a request for an updated history and physical form from*  
39 *the participant's personal health care provider using a standard*  
40 *update form that shall be maintained in the participant's health*

1 *record. This update form shall be developed by the department*  
2 *for that use and shall be published in the inpatient/outpatient*  
3 *provider manual. The department shall develop this form jointly*  
4 *with the statewide association representing adult day health care*  
5 *providers.*

6 *(c) Authorization or reauthorization of an adult day health*  
7 *care treatment authorization request shall be granted only if the*  
8 *participant meets all of the following medical necessity criteria:*

9 *(1) The participant has one or more chronic or post acute*  
10 *medical, cognitive, or mental health conditions that are identified*  
11 *by the participant's personal health care provider as requiring*  
12 *one or more of the following, without which the participant's*  
13 *condition will likely deteriorate and require emergency*  
14 *department visits, hospitalization, or other institutionalization:*

15 *(A) Monitoring.*

16 *(B) Treatment.*

17 *(C) Intervention.*

18 *(2) The participant has a condition or conditions resulting in*  
19 *both of the following:*

20 *(A) Limitations in the performance of two or more activities of*  
21 *daily living or instrumental activities of daily living, as those*  
22 *terms are defined in Section 14522.1, or a combination of one or*  
23 *more from each category.*

24 *(B) A need for assistance or supervision in performing the*  
25 *activities identified in subparagraph (A) as related to the*  
26 *condition or conditions specified in paragraph (1) of subdivision*  
27 *(c). That assistance or supervision shall be in addition to any*  
28 *other nonadult day health care support the participant is*  
29 *currently receiving in his or her place of residence.*

30 *(3) The participant's network of non-adult day health care*  
31 *center supports is insufficient to maintain the individual in the*  
32 *community, demonstrated by at least one of the following:*

33 *(A) The participant lives alone and has no family or*  
34 *caregivers available to provide sufficient and necessary care or*  
35 *supervision.*

36 *(B) The participant resides with one or more related or*  
37 *unrelated individuals, but they are unwilling or unable to provide*  
38 *sufficient and necessary care or supervision to the participant.*

1 (C) The participant has family or caregivers available, but  
2 those individuals require respite in order to continue providing  
3 sufficient and necessary care or supervision to the participant.

4 (4) A high potential exists for the deterioration of the  
5 participant's medical, cognitive, or mental health condition or  
6 conditions in a manner likely to result in emergency department  
7 visits, hospitalization, or other institutionalization if adult day  
8 health care services are not provided.

9 (5) The participant's condition or conditions require adult day  
10 health care services specified in subdivisions (a) to (c), inclusive,  
11 of Section 14550.5, on each day of attendance, that are  
12 individualized and designed to maintain the ability of the  
13 participant to remain in the community and avoid emergency  
14 department visits, hospitalizations, or other institutionalization.

15 (d) Reauthorization of an adult day health care treatment  
16 authorization request shall be granted when the criteria specified  
17 in subdivision (c) have been met and the participant's condition  
18 would likely deteriorate if the adult day health care services were  
19 denied.

20 ~~SEC. 4.~~

21 SEC. 5. Section 14528.1 is added to the Welfare and  
22 Institutions Code, to read:

23 14528.1. (a) The personal health care provider, as defined in  
24 Section 14552.3, shall have and retain responsibility for the  
25 participant's care.

26 (b) If the participant does not have a personal health care  
27 provider during the initial assessment process to determine  
28 eligibility for adult day health care, the adult day health care  
29 center staff physician may conduct the initial history and physical  
30 for the participant.

31 (c) The adult day health care center shall make all reasonable  
32 efforts to assist the participant in establishing a relationship with  
33 a personal health care provider.

34 (d) If the adult day health care center is unable to locate a  
35 personal health care provider for the participant, or if the  
36 participant refuses to establish a relationship with a personal  
37 health care provider, the adult day health center shall do both of  
38 the following:

39 (1) Document the lack of personal health care provider  
40 relationship in the participant's health record.

(2) Continue to document all efforts taken to assist the participant in establishing a relationship with a personal health care provider.

(e) (1) A personal physician for one or more of an adult day health care center's enrolled participants may serve as the adult day health care staff physician.

(2) When a personal physician serves as the staff physician, the physician shall have a personal care services arrangement with the adult care health center that meets the criteria set forth in Section 1395nn(e)(3)(A) of Title 42 of the United States Code.

(3) A personal care physician, an adult day health care staff physician, or an immediate family member of the personal care physician or adult day health care staff physician, shall comply with ownership interest restrictions as provided under Section 654.2 of the Business and Professions Code.

~~SEC. 5.~~

SEC. 6. Section 14550.5 is added to the Welfare and Institutions Code, to read:

14550.5. Adult day health centers shall offer, and provide directly on the premises, in accordance with the participant's individual plan of care, and subject to authorization pursuant to Section 14526, the following core services to each participant during each day of the participant's attendance at the center:

(a) One or more of the following core nursing services:

(1) Observation, assessment, and monitoring of the participant's health status and changes in his or her condition and risk factors.

(2) Management of chronic conditions using standard monitoring procedures at defined intervals and as necessary due to any change in the participant's condition.

(3) Monitoring of the participant's medication regimen, and the administration and recording of the participant's prescribed medications.

(4) Oral or written communication with the participant's personal physician, or the participant's family or other caregiver, regarding changes in the participant's condition, signs, or symptoms.

(5) Supervision of the provision of personal care services for the participant.

(b) One or more of the following core personal care services or social services:

(1) One or both of the following personal care services:

(A) Supervision of, or standby assistance with, activities of daily living or instrumental activities of daily living.

(B) Protective group supervision and interventions to assure participant safety and to minimize the risk of injury, accident, inappropriate behavior, or wandering.

(2) One or more of the following social services:

(A) Observation, assessment, and monitoring of the participant's psychosocial status.

(B) Group work to address psychosocial issues.

(C) Care coordination.

(c) At least one of the following therapeutic activities:

(1) Group or individual activities to enhance the social, physical, or cognitive functioning of the participant.

(2) Facilitated participation in scheduled group or individual activities for those participants whose frailty or cognitive functioning level precludes them from active participation.

(d) One meal per day of attendance, with the provision of a special or therapeutic diet as needed.

~~SEC. 6.~~

*SEC. 7.* Section 14550.6 is added to the Welfare and Institutions Code, to read:

14550.6. The adult day health care center may provide one or more of the core services, as described in Section 14550.5, at an enhanced level if any of the following conditions occurs:

(a) An expected condition, event, symptom, or group of symptoms that reaches a level of acuity, based on an assessment of the participant, requiring intervention by a member of the multidisciplinary team on a one-to-one basis or within a small group treatment setting.

(b) An expected condition, event, symptom, or group of symptoms that reaches a level of acuity, based on an assessment of the participant, requiring intervention or assistance by one or more trained adult day health care personnel.

(c) An unexpected condition, event, or symptom, or group of symptoms, that reaches a documented level of acuity requiring intervention by a member of the multidisciplinary team on a one-to-one basis or within a small group setting.



- 1 (d) An unexpected condition, event, symptom, or group of
- 2 symptoms that reaches a documented level of acuity requiring
- 3 intervention or assistance by one or more trained adult day health
- 4 care personnel.

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